



PTO/SB/17 (10-03)

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 0;">Effective 10/01/2003. Patent fees are subject to annual revision.</p>		Complete if Known																																																																																																																																																																																																																																															
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</div> <div style="display: flex; justify-content: space-between;"><div>TOTAL AMOUNT OF PAYMENT</div><div>(\$) 880.00</div></div>		Application Number	09/982543																																																																																																																																																																																																																																														
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		First Named Inventor	Peter T. Dijke																																																																																																																																																																																																																																														
		Examiner Name	R. S. Landsman																																																																																																																																																																																																																																														
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<div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None</div><div><input checked="" type="checkbox"/> Deposit Account:</div></div> <div style="margin-top: 5px;">Deposit Account Number: 18-1945</div> <div style="margin-top: 5px;">Deposit Account Name: Ropes & Gray LLP</div> <div style="margin-top: 5px;">The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div>																																																																																																																																																																																																																																																	
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ED 181235063 US, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: July 27, 2004 Signature: (Linda Blake)